

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America	COURT CASE NUMBER 14-04987
DEFENDANT JERONE WALKER	TYPE OF PROCESS HANDBILL
NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN JERONE WALKER	
ADDRESS (Street or RFD, Apartment No., City, State and ZIP code) 830 Ungers Lane Boyertown, PA 19512	

**SERVE
AT**

SEND NOTICE OF SERVICE COPY OF REQUESTER AT NAME AND ADDRESS BELOW

KML Law Group, P.C.
701 Market
Suite 5000
Philadelphia, PA 19106Number of process to be
served with this Form 285Number of parties to be
served in this caseCheck for service
on U.S.A.**FILED**SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers and Estimated Times Available for Service)

Signature of Attorney other Originator requesting service behalf of:

☒ PLAINTIFF
☐ DEFENDANTTELEPHONE NUMBER
215-627-1322DATE
10/3/16**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)Total Process
1District of
Origin
No.District to
Serve
No.

Signature of Authorized USMS Deputy or Clerk

Date

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date
10/7/16 Time
3:00 ☒ am
☒ pm

Signature of U.S. Marshal or Deputy

Paw D. Huk

Service Fee	Total Mileage Charges (including enroute)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
65.00	8.10		73.10		8.10 - \$0.00

REMARKS: Posted - occupied residence 15 miles roundtrip

PRINT 5 COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT* - To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/80